PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000									097	1 78	70r		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALI	ENTITY OTHER THAN OR SMALL ENTITY					
TOTAL CLAIMS			8				RAT	E	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		· d		X\$ 9	<u> </u>		OR	X\$18=		
INDEPENDENT CLAIMS			Ø_ minus 3 =		· £		X40	=		OR	X80=	400.0	7
MULTIPLE DEPENDENT CLAIM PRESENT								=		OR	+270=		1 3
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA			OR	TOTAL	1110:	0
	7/23/04°	LAIMS AS A (Column 1)		_	ENTITY	OR	OTHER SMALL I	THAN					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUM PREVIO PAID	EST BER DUSLY	(Column 3) PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE	u.	RATE	ADDI- TIONAL FEE	and the stand
	Total	. 20	Minus	2	0	=	X\$ 9	Ü		OR	X\$18=		* 1
	Independent	· 10	Minus .	••• 9		- 2	X40			OR	XBOS	172.	5
Ľ	FIRST PRESE	NTATION OF MI	JETIPLE DEF	PENDENI	CLAIM		+135	=		OR	+270=		is way
	0-27-05	5					ADDIT. F			امرا	TOTAL ADDIT. FEE	172	PP
ř	(Column 1) (Column 2) (Column 3)							_					0 4
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATI	€	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE	witter d
	Total	.20	Minus	. 6	20	• U .	X\$ 9	-			X\$18=	-	V
	Independent	· / ()	Minus	*** /		• 	X40-			OR	X80=		
_	PINST PRESE	NIAIRON OF MO	JETIPLE DEP	ENDENI	CLAIM		+135	_	· · · ·	OR	+270=		
							TOT ADDIT. F			OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	-PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	7
	Total	•	Minus	••		.	X\$ 9-	.]	,	OR	X\$18=		. 8
	Independent		Minus	***	01.4***	•	X40=			OR	X80=		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.		OR	+270=		7
If the entry in column 1 is less than the entry in column 2, write '0' in column 3.										OR	TOTAL		33
	'il the "Highest Nu	Tiber Previously Pa Tiber Previously Pai Tiber Previously Pai	uid For IN THI	S SPACE I	s loss tha	n 3, enter "3."	ADDIT, FI		ropriate box	•	ADDIT. FEE UMA 1,		ST SPRINGER W.

Application or Docket Number